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PTO/SB/22 (08-03)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 003797.78520
In re Application of Kagle 09/299784 T.W.		
Application Number 16/021,255		Filed April 27, 1999
For Simplified Design For HTML		
Art Unit 2178	Examiner Cong-Lac Huynh	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|----------|
| <input checked="" type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | \$120.00 |
| <input type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$_____ |
| <input type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | \$_____ |
| <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$_____ |
| <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$_____ |
|
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____. | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-0733</u> . I have enclosed a duplicate copy of this sheet. | | |

- I am the
- | | |
|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | applicant/inventor. |
| <input type="checkbox"/> | assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). |
| <input checked="" type="checkbox"/> | attorney or agent of record. Registration No. <u>36,402</u> |
| <input type="checkbox"/> | attorney or agent under 37 CFR 1.34(a). |

Registration number if acting under 37 CFR 1.34(a). _____ .

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

June 28, 2005



Signature

Date

Robert S. Katz

202-824-3000

Typed or printed name

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the USPTO (703-872-9306) on the date shown below.

Typed or printed name	Robert S. Katz	
Signature		Date June, 28, 2005

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